



FOR YOUTH DEVELOPMENT<sup>®</sup>  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## Donation Request Form

Name of Business/Event Requesting Donation \_\_\_\_\_

Purpose of Request \_\_\_\_\_

Event Date \_\_\_\_\_ Event Location \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship to Organization/Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_

### Donation Request:

\_\_\_\_\_ Monetary Donation  
\*if so, how much \_\_\_\_\_

\_\_\_\_\_ YMCA Gift Certificate  
\*if so, quantity \_\_\_\_\_

\_\_\_\_\_ YMCA Facility Guest Pass  
\*if so, quantity \_\_\_\_\_

\_\_\_\_\_ Other  
\*please specify \_\_\_\_\_

Do you pledge that your organization's use of any donation from the Henry County YMCA will not discriminate against those it serves based on race, color, religion, gender, national origin, disability, marital status, veteran status, sexual orientation or other basis prohibited by law?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Signature \_\_\_\_\_ Date \_\_\_\_\_